

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

JOHNSON FOR CONGRESS

ADDRESS (number and street)

PO BOX 14496

Check if different  
than previously  
reported. (ACC)

POLAND

OH

44514

2. FEC IDENTIFICATION NUMBER ▼

C

C00476820

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

OH

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer PERRY J CHICKONOSKI

Signature of Treasurer

PERRY J CHICKONOSKI

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 95

Write or Type Committee Name

JOHNSON FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	180940.15	960441.14
(b) Total Contribution Refunds (from Line 20(d)) .....	185.12	8085.12
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	180755.03	952356.02
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	60675.13	464512.01
(b) Total Offsets to Operating Expenditures (from Line 14).....	66.43	145.17
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	60608.70	464366.84
8. Cash on Hand at Close of Reporting Period (from Line 27).....	650942.37	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

**JOHNSON FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	3

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

69293.15

386552.86

(ii) Unitemized.....

4187.00

19214.10

(iii) TOTAL of contributions from individuals ▶

73480.15

405766.96

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

107460.00

550250.45

(d) The Candidate.....

0.00

4423.73

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

180940.15

960441.14

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

2558.65

25106.81

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

66.43

145.17

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.95

3.88

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

183566.18

985697.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 95

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	60675.13	464512.01
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	173.08
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	15000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	15000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	185.12	8085.12
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	185.12	8085.12
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	60860.25	487770.21

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	528236.44
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	183566.18
25. SUBTOTAL (add Line 23 and Line 24).....	711802.62
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	60860.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	650942.37

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PETER L APICELLA****A.**

Mailing Address 2205 PEARCE ST.

City

SALEM

State

OH

Zip Code

44480

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SALEM RADIOLOGISTS, INC

Occupation

PHYSICIAN

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		14		2013

Transaction ID : SA11AI.92697

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**JAMES S ASLANIDES****B.**

Mailing Address 46281 US HIGHWAY 36

P.O. BOX 715

City

COSHOCOTON

State

OH

Zip Code

43812

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MID-OHIO OPERATING, LTD

Occupation

OWNER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		12		2013

Transaction ID : SA11AI.92627

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ROBERT J BACHINGER****C.**

Mailing Address 5286 N BEACON DRIVE

City

YOUNGSTOWN

State

OH

Zip Code

44515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMPCO INDUSTRIES

Occupation

VP INFORMATION TECHNOLOGIES

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		14		2013

Transaction ID : SA11AI.92693

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

4000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

JAMES BEARDSLEY

A.

Mailing Address 1616 VALLEY RD

City

SALEM

State

OH

Zip Code

44460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BEARDSLEY'S HOLSTEINS

Occupation

FARMER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

3450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2013

Transaction ID : SA11AI.92633

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

JAMES BEARDSLEY

Mailing Address 1616 VALLEY RD

City

SALEM

State

OH

Zip Code

44460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BEARDSLEY'S HOLSTEINS

Occupation

FARMER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

3450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2013

Transaction ID : SA11AI.92634

Amount of Each Receipt this Period

-850.00

[MEMO ITEM]

REDESIGNATED TO G-2014

C.

Full Name (Last, First, Middle Initial)

JAMES BEARDSLEY

Mailing Address 1616 VALLEY RD

City

SALEM

State

OH

Zip Code

44460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BEARDSLEY'S HOLSTEINS

Occupation

FARMER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

3450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2013

Transaction ID : SA11AI.92635

Amount of Each Receipt this Period

850.00

[MEMO ITEM]

REDESIGNATED FROM P-2014

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

MICHAEL BEER

A.

Mailing Address 8500 INNISFREE DR

City

SPRINGFIELD

State

VA

Zip Code

22153

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WILLIAMS & JENSENOccupation  
EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		25		2013

Transaction ID : SA11AI.92596

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

CYNTHIA BOICH

B.

Mailing Address 125 OCEAN DRIVE  
UNIT 303

City

MIAMI BEACH

State

FL

Zip Code

33139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOME MAKEROccupation  
HOME MAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2013

Transaction ID : SA11AI.92722

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

CYNTHIA BOICH

C.

Mailing Address 125 OCEAN DRIVE  
UNIT 303

City

MIAMI BEACH

State

FL

Zip Code

33139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOME MAKEROccupation  
HOME MAKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2013

Transaction ID : SA11AI.92723

Amount of Each Receipt this Period

2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5700.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MICHAEL CALLEN****A.**

Mailing Address 3280 UNIVERSITY AVE., STE 6

City

MORGANTOWN

State

WV

Zip Code

26505

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OHIO VALLEY COLLEGE OF TECHNOLOGY

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		23		2013

Transaction ID : SA11AI.92661

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**STEPHEN CALLEN****B.**

Mailing Address 144 WILLEY ST

City

MORGANTOWN

State

WV

Zip Code

26505

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OHIO VALLEY COLLEGE OF TECHNOLOGY

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		23		2013

Transaction ID : SA11AI.92662

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JULIE HERSHEY CARR****C.**

Mailing Address 1735 FAIRVIEW AVE

City

MCLEAN

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KOUNTOPES CONSULTING, LLC

Occupation

CONSULTANT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		23		2013

Transaction ID : SA11AI.92724

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

THE CHICKASAW NATION

Mailing Address 2020 LONNIE ABBOTT BLVD

City

ADA

State

OK

Zip Code

74820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE CHICKASAW NATION

Occupation

NATIVE AMERICAN TRIBE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2013

Transaction ID : SA11AI.92670

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

STEPHEN R CIELEC

Mailing Address 66 PRIVATE DRIVE

City

CHESAPEAKE

State

OH

Zip Code

45619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCDONALDS

Occupation

FRANCHISE OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		12		2013

Transaction ID : SA11AI.92632

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

DAVID COLE

Mailing Address 205 CHATHAM COURT

City

WARREN

State

OH

Zip Code

44484

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COLE VALLEY CADDILAC

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2013

Transaction ID : SA11AI.92715

Amount of Each Receipt this Period

5200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAVID COLE

A.

Mailing Address 205 CHATHAM COURT

City

WARREN

State

OH

Zip Code

44484

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COLE VALLEY CADDILAC

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		21		2013

Transaction ID : SA11AI.92716

Amount of Each Receipt this Period

-2600.00

[MEMO ITEM]

REDESIGNATED TO G-2014

Full Name (Last, First, Middle Initial)

DAVID COLE

B.

Mailing Address 205 CHATHAM COURT

City

WARREN

State

OH

Zip Code

44484

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COLE VALLEY CADDILAC

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		21		2013

Transaction ID : SA11AI.92717

Amount of Each Receipt this Period

2600.00

[MEMO ITEM]

REDESIGNATED FROM P-2014

Full Name (Last, First, Middle Initial)

SUSAN E DEHMLow

C.

Mailing Address 611 4TH STREET

City

MARIETTA

State

OH

Zip Code

45750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMFORT KEEPERS

Occupation

COMMUNITY LIAISON

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		09		2013

Transaction ID : SA11AI.92584

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

JAMES W DENNY III

A.

Mailing Address 9723 BRIAR FOREST DRIVE

City

HOUSTON

State

TX

Zip Code

77042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRIAD HUNTER

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4785.12

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2013

Transaction ID : SA11AI.92213

Amount of Each Receipt this Period

2000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

JAMES W DENNY III

B.

Mailing Address 9723 BRIAR FOREST DRIVE

City

HOUSTON

State

TX

Zip Code

77042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRIAD HUNTER

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4785.12

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2013

Transaction ID : SA11AI.93619

Amount of Each Receipt this Period

-2000.00

[MEMO ITEM]

REDESIGNATED TO G-2014

Full Name (Last, First, Middle Initial)

JAMES W DENNY III

C.

Mailing Address 9723 BRIAR FOREST DRIVE

City

HOUSTON

State

TX

Zip Code

77042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRIAD HUNTER

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4785.12

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2013

Transaction ID : SA11AI.93620

Amount of Each Receipt this Period

2000.00

[MEMO ITEM]

REDESIGNATED FROM P-2014

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOHN W DUNNING

A.

Mailing Address 5172 COLLEGE HILL RD.

City

CAMBRIDGE

State

OH

Zip Code

43725

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DUNNING MOTOR CARS

Occupation

AUTO DEALER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		27		2013

Transaction ID : SA11AI.92744

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MARK EVANS

B.

Mailing Address 12692 SOUTH AVE

City

NORTH LIMA

State

OH

Zip Code

44452

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARK H EVANS MD

Occupation

PHYSICIAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		14		2013

Transaction ID : SA11AI.92695

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

GARY EVANS

C.

Mailing Address P.O. BOX 540308

City

DALLAS

State

TX

Zip Code

75354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		16		2013

Transaction ID : SA11AI.92564

Amount of Each Receipt this Period

5200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

GARY EVANS

A.

Mailing Address P.O. BOX 540308

City

DALLAS

State

TX

Zip Code

75354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2013

Transaction ID : SA11AI.92565

Amount of Each Receipt this Period

-2600.00

[MEMO ITEM]

REDESIGNATED TO G-2014

Full Name (Last, First, Middle Initial)

GARY EVANS

B.

Mailing Address P.O. BOX 540308

City

DALLAS

State

TX

Zip Code

75354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2013

Transaction ID : SA11AI.92566

Amount of Each Receipt this Period

2600.00

[MEMO ITEM]

REDESIGNATED FROM P-2014

Full Name (Last, First, Middle Initial)

SUSAN M EVANS

C.

Mailing Address 614 WOOSTER ST

City

MARIETTA

State

OH

Zip Code

45750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOME MAKER

Occupation

HOME MAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2013

Transaction ID : SA11AI.92752

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

REX FERRY

A.

Mailing Address 4020 GULFSHORE BLVD  
N UNIT 605

City	State	Zip Code
NAPLES	FL	34103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VALLEY ELECTRICAL CONSOLIDATED

Occupation  
EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2013

Transaction ID : SA11AI.92739

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

GEORGE FOWLER

B.

Mailing Address 26239 NORTH ST

City	State	Zip Code
COOLVILLE	OH	45723

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2013

Transaction ID : SA11AI.93480

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

ELIZABETH FRAZEE

C.

Mailing Address 6313 EVERMAY DR.

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TWINLOGIC STRATEGIES

Occupation  
CONSULTANT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2013

Transaction ID : SA11AI.92649

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2150.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 95

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DAVID FRIO**

Mailing Address 67740 MILLS RD

City

SAINT CLAIRSVILLE

State

OH

Zip Code

43950

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MPR SUPPLY CHAIN SOLUTIONS

Occupation

EXECUTIVE

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2013

Transaction ID : SA11AI.92644

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**RICHARD C FRYDA**

Mailing Address 8383 STONEY CREEK

City

BOARDMAN

State

OH

Zip Code

44512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMPCO INDUSTRIES

Occupation

EXECUTIVE

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2013

Transaction ID : SA11AI.92694

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**VICKI GARCIA**

Mailing Address 1675 FARRIER TRAIL

City

CLEARWATER

State

FL

Zip Code

33765

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

MUSICIAN

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2013

Transaction ID : SA11AI.92664

Amount of Each Receipt this Period

2600.00

**SUBTOTAL** of Receipts This Page (optional).....

3850.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 OF 95

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RONALD GARLAND**

**A.**

Mailing Address 1607 MOTOR INN DR, STE 2

City

GIRARD

State

OH

Zip Code

44420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GARLAND & SHELLHORN

Occupation

ACCOUNTANT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
11 12 2013

Transaction ID : SA11AI.92625

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**PAUL GREIG**

**B.**

Mailing Address 426 2ND ST

City

MARIETTA

State

OH

Zip Code

45750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GREIG RESOURCES

Occupation

METALS BROKIER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y  
12 14 2013

Transaction ID : SA11AI.92696

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**RONALD GUTHRIE**

**C.**

Mailing Address C/O K J R W TRUST  
P.O. BOX 157

City

CAMBRIDGE

State

OH

Zip Code

43725

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GUTHRIE INSURANCE AGENCY

Occupation

INSURANCE AGENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y  
10 06 2013

Transaction ID : SA11AI.92512

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAVID HAAS

A.

Mailing Address 357 COUNTY HOUSE LN

City

MARIETTA

State

OH

Zip Code

45750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MORRISON INCORPORATED

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2013

Transaction ID : SA11AI.92508

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

NORMAN HAESSLY

B.

Mailing Address 389 SHEETS RUN RD

City

MARIETTA

State

OH

Zip Code

45750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HAESSLY HARDWOOD LUMBER

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2013

Transaction ID : SA11AI.93524

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

EDWARD HATFIELD

C.

Mailing Address 4905 BURLEY HILLS DR

City

CINCINNATI

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RIVER TRADING COMP

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2013

Transaction ID : SA11AI.92647

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2050.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

TODD HAWKINS

Mailing Address 350 JENNINGS HILL RD.

City

MARIETTA

State

OH

Zip Code

45750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARIETTA MEMORIAL HOSPITAL

Occupation

PHYSICIAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

930.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2013

Transaction ID : SA11AI.93613

Amount of Each Receipt this Period

680.00

IN-KIND: FOOD FOR FUNDRAISING EVENT

Full Name (Last, First, Middle Initial)

JACK HILL

Mailing Address 10008 MAGNOLIA BEND DR

City

BONITA SPRINGS

State

FL

Zip Code

34135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HILL INTERNATIONAL TRUCKS

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2013

Transaction ID : SA11AI.92689

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

DAVID HILL

Mailing Address 60444 APACHE LANE

City

SENECAVILLE

State

OH

Zip Code

43780

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DAVID R HILL INC

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2745.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		12		2013

Transaction ID : SA11AI.92628

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2680.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**JOHNSON FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>DAVID HILL</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 12 / 2013		
Mailing Address 60444 APACHE LANE			<b>Transaction ID : SA11AI.92629</b>		
City SENECAVILLE	State OH	Zip Code 43780	Amount of Each Receipt this Period -145.09		
FEC ID number of contributing federal political committee. C		[MEMO ITEM] REDESIGNATED TO G-2014			
Name of Employer DAVID R HILL INC		Occupation EXECUTIVE			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2745.09			
<b>B.</b> Full Name (Last, First, Middle Initial) <b>DAVID HILL</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 12 / 2013		
Mailing Address 60444 APACHE LANE			<b>Transaction ID : SA11AI.92630</b>		
City SENECAVILLE	State OH	Zip Code 43780	Amount of Each Receipt this Period 145.09		
FEC ID number of contributing federal political committee. C		[MEMO ITEM] REDESIGNATED FROM P-2014			
Name of Employer DAVID R HILL INC		Occupation EXECUTIVE			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2745.09			
<b>C.</b> Full Name (Last, First, Middle Initial) <b>THOMAS HUDGINS</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 20 / 2013		
Mailing Address 1865 BUGLE LN			<b>Transaction ID : SA11AI.93529</b>		
City CLEARWATER	State FL	Zip Code 33764	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C					
Name of Employer LAKEVIEW BAPTIST CHURCH		Occupation ASSOCIATE PASTOR			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 225.00			
<b>SUBTOTAL</b> of Receipts This Page (optional).....			25.00		
<b>TOTAL</b> This Period (last page this line number only).....					

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

THOMAS HUDGINS

Mailing Address 1865 BUGLE LN

City

CLEARWATER

State

FL

Zip Code

33764

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LAKEVIEW BAPTIST CHURCH

Occupation

ASSOCIATE PASTOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2013

Transaction ID : SA11AI.92741

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

JAMES HUGGINS

Mailing Address 17 SYLVAN WAY

City

MARIETTA

State

OH

Zip Code

45750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THEISEN BROCK LPA

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2013

Transaction ID : SA11AI.92686

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

DAVID N HUGHES

Mailing Address 358 APPLE RIDGE RD.

City

SALEM

State

OH

Zip Code

44460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPECIALTY FAB

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2013

Transaction ID : SA11AI.92690

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

1525.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HUNTON & WILLIAMS LLP****A.**

Mailing Address 2200 PENNSYLVANIA AVENUE, NW

City

WASHINGTON

State

DC

Zip Code

20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

PARTNERSHIP

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		13		2013

Transaction ID : SA11AI.92641

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**JERRY JAMES****B.**

Mailing Address 375 ASHTON LN

City

LOWELL

State

OH

Zip Code

45744

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

JAMES ENGINEERING INC

ENGINEER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		04		2013

Transaction ID : SA11AI.92676

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**RICHARD LEE****C.**

Mailing Address 1530 WATERWITCH DR

City

ORLANDO

State

FL

Zip Code

32806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

FAMLEE INVESTMENT COMPANY

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		04		2013

Transaction ID : SA11AI.92679

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

BRUCE LEVENGOOD

A.

Mailing Address 3632 STATE ROUTE 800 NE

P.O. BOX 306

City

DOVER

State

OH

Zip Code

44622

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOUND ENERGY COMPANY INCOccupation  
EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2013

Transaction ID : SA11AI.92680

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

RANDALL LEWIS

B.

Mailing Address 8410 IVY HILL DR

City

POLAND

State

OH

Zip Code

44514

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EAGLE RENTAL PURCHASEOccupation  
EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2013

Transaction ID : SA11AI.92678

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

W. ROGER LEWIS

C.

Mailing Address 55500 DILLES BOTTOM ROAD

City

SHADYSIDE

State

OH

Zip Code

43947

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OH-WV EXCAVATINGOccupation  
EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1413.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2013

Transaction ID : SA11AI.93615

Amount of Each Receipt this Period

413.15

IN-KIND: FOOD FOR FUNDRAISER

SUBTOTAL of Receipts This Page (optional).....

1913.15

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

CARTER LEWIS

Mailing Address 8031 EAST MARKET STREET

City

WARREN

State

OH

Zip Code

44484

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LEWIS DEVELOPMENT CORP

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		23		2013

Transaction ID : SA11AI.92663

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

PAUL LYDEN

Mailing Address 5633 S SALEM WARREN RD

City

NORTH JACKSON

State

OH

Zip Code

44451

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LYDEN OIL COMPANY

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		04		2013

Transaction ID : SA11AI.92677

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JACK K. MILLER

Mailing Address 2262 HEYL RD

City

WOOSTER

State

OH

Zip Code

44691

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MILLER PIPE SUPPLY

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2013

Transaction ID : SA11AI.92718

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>TIFFANY MOORE</b>			Date of Receipt M M / D D / Y Y Y Y <b>11 / 14 / 2013</b>	
Mailing Address <b>417 QUACKENBOS STREET, NW</b>			<b>Transaction ID : SA11AI.92648</b>	
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20011</b>	Amount of Each Receipt this Period <b>500.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer <b>TWIN LOGIC STRATEGIES</b>		
		Occupation <b>CONSULTANT</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>500.00</b>		

Full Name (Last, First, Middle Initial) <b>GEORGE MORRIS</b>			Date of Receipt M M / D D / Y Y Y Y <b>11 / 23 / 2013</b>	
Mailing Address <b>1585 MANOR DR</b>			<b>Transaction ID : SA11AI.92666</b>	
City <b>SALEM</b>	State <b>OH</b>	Zip Code <b>44460</b>	Amount of Each Receipt this Period <b>500.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer <b>MORRIS FINANCIAL GROUP</b>		
		Occupation <b>EXECUTIVE</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>500.00</b>		

Full Name (Last, First, Middle Initial) <b>MARK MUNROE</b>			Date of Receipt M M / D D / Y Y Y Y <b>12 / 14 / 2013</b>	
Mailing Address <b>PO BOX 503</b>			<b>Transaction ID : SA11AI.92691</b>	
City <b>COLUMBIANA</b>	State <b>OH</b>	Zip Code <b>44408</b>	Amount of Each Receipt this Period <b>1000.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer <b>COMPCO INDUSTRIES</b>		
		Occupation <b>EXECUTIVE</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>1000.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HENRY NEMENZ**

**A.**

Mailing Address 8518 TWIN OAKS CT

City

POLAND

State

OH

Zip Code

44514

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HP NEMENZ FOOD INC.

Occupation

RETAIL FOOD

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 10 / 2013

**Transaction ID : SA11AI.92557**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**HENRY PLASTER III**

**B.**

Mailing Address 5407 ALBEMARIE

City

BETHESDAY

State

MD

Zip Code

20816

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PLASTER & ASSOCIATES

Occupation

GOVERNMENT RELATIONS

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 13 / 2013

**Transaction ID : SA11AI.92638**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**SHARON RHOADS**

**C.**

Mailing Address 119 8TH ST E

City

TIERRA VERDE

State

FL

Zip Code

33715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VANDALIA ENTERPRISES

Occupation

EXECUTIVE

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 16 / 2013

**Transaction ID : SA11AI.92684**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1450.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILLIAM RIESBECK

A.

Mailing Address 120 TUDOR

City

SAINT CLAIRSVILLE

State

OH

Zip Code

43950

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RIESBECK FOOD MARKETS

Occupation

RETAIL MERCHANT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2013

Transaction ID : SA11AI.92685

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ARNOLD SIEMER

B.

Mailing Address 2 BOTTOMLEY CRESCENT CT

City

GAHANNA

State

OH

Zip Code

43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DESCO CORPORATION

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2013

Transaction ID : SA11AI.92721

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

ARNOLD SIEMER

C.

Mailing Address 2 BOTTOMLEY CRESCENT CT

City

GAHANNA

State

OH

Zip Code

43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DESCO CORPORATION

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2013

Transaction ID : SA11AI.93530

Amount of Each Receipt this Period

-2500.00

[MEMO ITEM]

REDESIGNATED TO G-2014

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
           12       13a       13b       14       15

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NAME OF COMMITTEE (In Full)  
**JOHNSON FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>ARNOLD SIEMER</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>12 / 21 / 2013</div> </div>	
Mailing Address <b>2 BOTTOMLEY CRESCENT CT</b>			<b>Transaction ID : SA11AI.93531</b>	
City <b>GAHANNA</b>	State <b>OH</b>	Zip Code <b>43054</b>	Amount of Each Receipt this Period <div> <div></div> <div>2500.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>		Name of Employer <b>DESCO CORPORATION</b>		
Occupation <b>EXECUTIVE</b>		Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date <div> <div></div> <div>5100.00</div> </div>		<b>[MEMO ITEM]</b> REDESIGNATED FROM P-2014		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>GREGORY SMITH</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>12 / 14 / 2013</div> </div>	
Mailing Address <b>400 W RAILROAD ST</b>			<b>Transaction ID : SA11AI.92698</b>	
City <b>COLUMBIANA</b>	State <b>OH</b>	Zip Code <b>44408</b>	Amount of Each Receipt this Period <div> <div></div> <div>1000.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>		Name of Employer <b>COMPCO METAL CO</b>		
Occupation <b>EXECUTIVE</b>		Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date <div> <div></div> <div>1000.00</div> </div>				
<b>C.</b> Full Name (Last, First, Middle Initial) <b>JOEL E SOFRANKO</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>12 / 14 / 2013</div> </div>	
Mailing Address <b>547 STEVENSON AVE</b>			<b>Transaction ID : SA11AI.92688</b>	
City <b>WORHINGTON</b>	State <b>OH</b>	Zip Code <b>43085</b>	Amount of Each Receipt this Period <div> <div></div> <div>1000.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>		Name of Employer <b>SELF</b>		
Occupation <b>CERTIFIED PUBLIC ACCOUNTANT</b>		Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date <div> <div></div> <div>1000.00</div> </div>				
<b>SUBTOTAL</b> of Receipts This Page (optional).....			<div> <div></div> <div>2000.00</div> </div>	
<b>TOTAL</b> This Period (last page this line number only).....			<div> <div></div> <div></div> </div>	

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THOMAS STEWART****A.**

Mailing Address 2141 WILLIAM T CIRCLE

City

LANCASTER

State

OH

Zip Code

43130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OHIO OIL AND GAS ASSOCIATION

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2013

**Transaction ID : SA11AI.92753**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**STEVEN STORY****B.**Mailing Address 216 E MAIN ST  
SUITE 200

City

POMEROY

State

OH

Zip Code

45769

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		27		2013

**Transaction ID : SA11AI.92742**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**PATRICIA TINGLE****C.**

Mailing Address 41234 SPRINGHILL DR

City

LEETONIA

State

OH

Zip Code

44431

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2013

**Transaction ID : SA11AI.92682**

Amount of Each Receipt this Period

2600.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4100.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

KIRK TROSCLAIR

A.

Mailing Address 108 ASHTON DR.

City

THIBODAUX

State

LA

Zip Code

70301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MAGNUM HUNTEROccupation  
SENIOR VP EQUIPMENT SERVICES

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		03		2013

Transaction ID : SA11AI.92548

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

GENE VALENTINE

B.

Mailing Address 219 DELLA DRIVE

City

BLOOMINGDALE

State

OH

Zip Code

43910

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FINANCIAL WEST GROUPOccupation  
SECUTITIES DEALER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		16		2013

Transaction ID : SA11AI.92738

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

J DANIEL WALSH

C.

Mailing Address 211 MANOR DRIVE

City

EDINBURG

State

VA

Zip Code

22824

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GREENBERG TRAURIGOccupation  
GOVERNMENT AFFAIRS

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		04		2013

Transaction ID : SA11AI.92681

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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for each category of the  
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FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHRISTOPHER WALTON

A.

Mailing Address 10504 ELLINGER ROAD

City

LOGAN

State

OH

Zip Code

43138

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHINO RESOURCE PARTNERS

Occupation

SENIOR VP

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2013

Transaction ID : SA11AI.92743

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

WILMA WARREN

B.

Mailing Address 1223 CANDLEWOOD DR

City

WHEELERSBURG

State

OH

Zip Code

45694

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		12		2013

Transaction ID : SA11AI.92626

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

FRANK WATSON

C.

Mailing Address 80 SLEEPY HOLLOW DR

City

CANFIELD

State

OH

Zip Code

44406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		14		2013

Transaction ID : SA11AI.92692

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

1100.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LEE WEISBERGER**

**A.**

Mailing Address 907 GRANARD PKWY

City

STEUBENVILLE

State

OH

Zip Code

43952

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EAST LIVERPOOL ANESTHESIA ASSOCIATE

Occupation

PHYSICIAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 04 / 2013

Transaction ID : SA11AI.92619

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**LEE WEISBERGER**

**B.**

Mailing Address 907 GRANARD PKWY

City

STEUBENVILLE

State

OH

Zip Code

43952

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EAST LIVERPOOL ANESTHESIA ASSOCIATE

Occupation

PHYSICIAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1800.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 29 / 2013

Transaction ID : SA11AI.92652

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**ROBERT WHITESIDE**

**C.**

Mailing Address 48368 SUMMIT DR

City

SAINT CLAIRSVILLE

State

OH

Zip Code

43950

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WHITESIDE CHEVROLET

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 05 / 2013

Transaction ID : SA11AI.92683

Amount of Each Receipt this Period

2600.00

**SUBTOTAL** of Receipts This Page (optional).....

3200.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**JOHNSON FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>DARREN WILLCOX</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 20 / 2013	
Mailing Address 10711 FALLS POINTE DRIVE		<b>Transaction ID : SA11AI.93528</b>	
City GREAT FALLS	State VA	Zip Code 22066	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer W STRATEGIES	Occupation CONSULTANT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		500.00	
<b>TOTAL</b> This Period (last page this line number only).....		69293.15	



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACTION COMMITTEE FOR RURAL ELECTRIFICATION. (ACRE) NATIONAL RURAL ELECTRIC COOPERATIVE

A.

Mailing Address 4301 WILSON BOULEVARD

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

C C00002972

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

8000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2013

Transaction ID : SA11C.92674

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 421 AVIATION WAY

City

FREDERICK

State

MD

Zip Code

21701

FEC ID number of contributing  
federal political committee.

C C00131185

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2013

Transaction ID : SA11C.92603

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)

Mailing Address 101 CONSTITUTION AVE NW  
SUITE 400W

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00089136

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2013

Transaction ID : SA11C.92651

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

3000.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1120 CONNECTICUT AVENUE NW

SUITE 600

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00004275

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 30 / 2013

Transaction ID : SA11C.92751

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AMERICAN CABLE ASSOCIATION INC PAC (ACA PAC)**

Mailing Address ONE PARKWAY CENTER, SUITE 212

City

PITTSBURGH

State

PA

Zip Code

15220

FEC ID number of contributing  
federal political committee.

**C** C00364109

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 31 / 2013

Transaction ID : SA11C.93522

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AMERICAN HOSPITAL ASSOCIATION PAC**

Mailing Address 325 SEVENTH STREET, NW

SUITE 700

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C** C00106146

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 30 / 2013

Transaction ID : SA11C.92750

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

2500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

**A.** Mailing Address 1111 NORTH FAIRFAX ST.

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing  
federal political committee.

**C** C00012880

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2013

Transaction ID : SA11C.92712

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AUTOMOTIVE FREE INTERNATIONAL TRADE PAC**

Mailing Address 1625 PRINCE STREET  
 SUITE 225

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing  
federal political committee.

**C** C00250399

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2013

Transaction ID : SA11C.92657

Amount of Each Receipt this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
**BILL PAC**

Mailing Address 228 S. WASHINGTON ST., STE. 115

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing  
federal political committee.

**C** C00412288

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2013

Transaction ID : SA11C.92748

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

4500.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BLUEGRASS COMMITTEE****A.**

Mailing Address 220 1/2 E ST., NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.**C**

C00235655

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2013

**Transaction ID : SA11C.92713**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**BLUEGRASS COMMITTEE****B.**

Mailing Address 220 1/2 E ST., NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.**C**

C00235655

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2013

**Transaction ID : SA11C.92714**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**BOSTON SCIENTIFIC CORPORATION POLITICAL ACTION COMMITTEE ('BSC PAC')****C.**

Mailing Address ONE BOSTON SCIENTIFIC PLACE

City

NATICK

State

MA

Zip Code

01760

FEC ID number of contributing  
federal political committee.**C**

C00357863

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2013

**Transaction ID : SA11C.92734**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

11000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BP CORPORATION NORTH AMERICA INC. POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address 501 WESTLAKE PARK BLVD

City

HOUSTON

State

TX

Zip Code

77079

FEC ID number of contributing  
federal political committee.

**C** C00060103

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 13 / 2013

**Transaction ID : SA11C.92704**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**BRADY FOR CONGRESS**

**B.**

Mailing Address PO BOX 8277

City

THE WOODLANDS

State

TX

Zip Code

77387

FEC ID number of contributing  
federal political committee.

**C** C00311043

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 13 / 2013

**Transaction ID : SA11C.92709**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**CARESOURCE MANAGEMENT SERVICES, CO. PAC**

**C.**

Mailing Address 230 N. MAIN STREET

City

DAYTON

State

OH

Zip Code

45402

FEC ID number of contributing  
federal political committee.

**C** C00424879

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 06 / 2013

**Transaction ID : SA11C.92667**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

3500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CHESAPEAKE PAC**

**A.**

Mailing Address 2470 DANIELL'S BRIDGE RD STE 121

City

ATHENS

State

GA

Zip Code

30606

FEC ID number of contributing  
federal political committee.

**C** C00492819

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 25 2013

**Transaction ID : SA11C.92600**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CINCINNATI BELL INC FEDERAL PAC**

**B.**

Mailing Address 221 E FOURTH STREET (103-1170)

City

CINCINNATI

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

**C** C00087478

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 25 2013

**Transaction ID : SA11C.92602**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**COALPAC**

**C.**

Mailing Address 101 CONSTITUTION AVENUE NW  
SUITE 500 EAST

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00109819

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 20 2013

**Transaction ID : SA11C.92728**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

3000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**COMPETITIVE CARRIERS ASSOCIATION PAC (CCA PAC)**

Mailing Address 805 15TH STREET NW  
SUITE 401

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee.

**C** C00490698

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2013

Transaction ID : SA11C.92727

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CONSUMER ELECTRONICS ASSOCIATION PAC**

Mailing Address 1919 SOUTH EADS STREET

City	State	Zip Code
ARLINGTON	VA	22202

FEC ID number of contributing federal political committee.

**C** C00375048

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2013

Transaction ID : SA11C.92672

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**CONSUMER HEALTHCARE PRODUCTS ASSOCIATION PAC (CHPA/PAC)**

Mailing Address 900 19TH STREET, NW  
SUITE 700

City	State	Zip Code
WASHINGTON	DC	20006

FEC ID number of contributing federal political committee.

**C** C00040584

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2013

Transaction ID : SA11C.92655

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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for each category of the  
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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

**A.** Mailing Address 8400 WESTPARK DRIVE

City	State	Zip Code
MCLEAN	VA	22102

FEC ID number of contributing federal political committee.

**C** C00040998

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

Transaction ID : SA11C.92747

Amount of Each Receipt this Period

4000.00

Full Name (Last, First, Middle Initial)

**B.** **DIRECTV GROUP, INC. FUND - FEDERAL (DIRECTV PAC)**

Mailing Address 901 F STREET, NW  
 SUITE 600

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee.

**C** C00331991

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2013

Transaction ID : SA11C.92658

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** **DLA PIPER LLP (US) POLITICAL ACTION COMMITTEE (DLA PIPER PAC)**

Mailing Address 500 8TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee.

**C** C00151340

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2013

Transaction ID : SA11C.92654

Amount of Each Receipt this Period

750.00

**SUBTOTAL** of Receipts This Page (optional).....

5750.00

**TOTAL** This Period (last page this line number only).....



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**JOHNSON FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>DOMINION PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>29</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	11		29		2013	
M M M	/	D D D	/	Y Y Y Y Y Y										
11		29		2013										
Mailing Address <b>ONE JAMES RIVER PLAZA, 20TH FLOOR</b> <b>P.O. BOX 26666</b>		<b>Transaction ID : SA11C.92659</b>												
City <b>RICHMOND</b>	State <b>VA</b>	Zip Code <b>23261</b>												
FEC ID number of contributing federal political committee. <b>C C00108209</b>		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>1000.00</td> </tr> </table>												1000.00
										1000.00				
Name of Employer 		Occupation 												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>4500.00</td> </tr> </table>												4500.00
										4500.00				
<b>B.</b> Full Name (Last, First, Middle Initial) <b>DOMINION PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>20</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	12		20		2013	
M M M	/	D D D	/	Y Y Y Y Y Y										
12		20		2013										
Mailing Address <b>ONE JAMES RIVER PLAZA, 20TH FLOOR</b> <b>P.O. BOX 26666</b>		<b>Transaction ID : SA11C.92729</b>												
City <b>RICHMOND</b>	State <b>VA</b>	Zip Code <b>23261</b>												
FEC ID number of contributing federal political committee. <b>C C00108209</b>		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>500.00</td> </tr> </table>												500.00
										500.00				
Name of Employer 		Occupation 												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>5500.00</td> </tr> </table>												5500.00
										5500.00				
<b>C.</b> Full Name (Last, First, Middle Initial) <b>DOMINION PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>20</td> <td></td> <td>2013</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	12		20		2013	
M M M	/	D D D	/	Y Y Y Y Y Y										
12		20		2013										
Mailing Address <b>ONE JAMES RIVER PLAZA, 20TH FLOOR</b> <b>P.O. BOX 26666</b>		<b>Transaction ID : SA11C.93532</b>												
City <b>RICHMOND</b>	State <b>VA</b>	Zip Code <b>23261</b>												
FEC ID number of contributing federal political committee. <b>C C00108209</b>		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>500.00</td> </tr> </table>												500.00
										500.00				
Name of Employer 		Occupation 												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>5500.00</td> </tr> </table>												5500.00
										5500.00				
<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="10"></td> <td>2000.00</td> </tr> </table>												2000.00
										2000.00				
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="10"></td> <td></td> </tr> </table>												

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DUKE ENERGY CORPORATION PAC**

Mailing Address 550 SOUTH TRYON STREET

City

CHARLOTTE

State

NC

Zip Code

28202

FEC ID number of contributing  
federal political committee.

**C** C00083535

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 25 2013

**Transaction ID : SA11C.92604**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. E.I. DU PONT DE NEMOURS COMPANY GOOD GOVERNMENT FUND (DUPONT GOOD GOVERNMENT FUND)**

Mailing Address CHESTNUT RUN PLZ-BLDG 708/OFF. 178

974 CENTRE RD

City

WILMINGTON

State

DE

Zip Code

19805

FEC ID number of contributing  
federal political committee.

**C** C00171926

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 25 2013

**Transaction ID : SA11C.92605**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. ECOLAB INC. POLITICAL ACTION COMMITTEE**

Mailing Address 370 WABASH STREET N.

City

ST. PAUL

State

MN

Zip Code

55102

FEC ID number of contributing  
federal political committee.

**C** C00101485

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 13 2013

**Transaction ID : SA11C.92706**

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional).....

4500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ELECTRICAL CONTRACTORS PAC**

**A.**

Mailing Address 3 BETHESDA METRO CENTER

City

BETHESDA

State

MD

Zip Code

20814

FEC ID number of contributing  
federal political committee.

**C** C00113811

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 20 / 2013

**Transaction ID : SA11C.92735**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)**

**B.**

Mailing Address PO BOX 20503

City

INDIANAPOLIS

State

IN

Zip Code

46220

FEC ID number of contributing  
federal political committee.

**C** C00121368

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 25 / 2013

**Transaction ID : SA11C.92606**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**FEDEXPAC FEDERAL EXPRESS POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address 942 SOUTH SHADY GROVE ROAD

City

MEMPHIS

State

TN

Zip Code

38120

FEC ID number of contributing  
federal political committee.

**C** C00068692

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 13 / 2013

**Transaction ID : SA11C.92646**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional).....

8000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FORD MOTOR COMPANY CIVIC ACTION FUND**

Mailing Address P.O. BOX 75000, PAC SVS MC 2250

City

DETROIT

State

MI

Zip Code

48275

FEC ID number of contributing  
federal political committee.

**C** C00046474

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 30 / 2013

Transaction ID : SA11C.92749

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**GROWTH ENERGY PAC**

Mailing Address 777 N CAPITOL ST NE, SUITE 805

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

**C** C00475665

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 13 / 2013

Transaction ID : SA11C.92643

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**HELP AMERICA'S LEADERS POLITICAL ACTION COMMITTEE (HALPAC)**

Mailing Address 701 8TH STREET, NW  
SUITE 500

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00376038

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 31 / 2013

Transaction ID : SA11C.93525

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....

4500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOHN S FUND

Mailing Address PO BOX 853

City

EDWARDSVILLE

State

IL

Zip Code

62025

FEC ID number of contributing  
federal political committee.

C C00390831

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2013

Transaction ID : SA11C.93624

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JOHNSON &amp; JOHNSON POLITICAL ACTION COMMITTEE

Mailing Address ONE JOHNSON &amp; JOHNSON PLAZA

City

NEW BRUNSWICK

State

NJ

Zip Code

08933

FEC ID number of contributing  
federal political committee.

C C00010983

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2013

Transaction ID : SA11C.92736

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

K&amp;L GATES LLP PAC

Mailing Address 1601 K STREET NW

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

C C00213173

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2013

Transaction ID : SA11C.92607

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

2500.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100

City	State	Zip Code
ARLINGTON	VA	22202

FEC ID number of contributing  
federal political committee.

**C** C00303024

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

11 / 29 / 2013

Transaction ID : SA11C.92650

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100

City	State	Zip Code
ARLINGTON	VA	22202

FEC ID number of contributing  
federal political committee.

**C** C00303024

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

12 / 27 / 2013

Transaction ID : SA11C.92726

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**LOEWS CORPORATION ENERGY PUBLIC AFFAIRS COMMITTEE**

**C.**

Mailing Address 667 MADISON AVENUE

City	State	Zip Code
NEW YORK	NY	10065

FEC ID number of contributing  
federal political committee.

**C** C00473082

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

12 / 13 / 2013

Transaction ID : SA11C.92705

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MAKING AMERICA PROSPEROUS PAC**

Mailing Address PO BOX 2485

City

SPRINGFIELD

State

VA

Zip Code

22152

FEC ID number of contributing  
federal political committee.

**C** C00445379

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 13 / 2013

Transaction ID : SA11C.92708

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

**MERCK & CO., INC., EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)**

Mailing Address 601 PENNSYLVANIA AVE., NW  
NORTH BUILDING, SUITE 1200

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C** C00097485

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 20 / 2013

Transaction ID : SA11C.92737

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

**MOLINA HEALTHCARE, INC. PAC**

Mailing Address 200 OCEANGATE  
SUITE 100

City

LONG BEACH

State

CA

Zip Code

90802

FEC ID number of contributing  
federal political committee.

**C** C00430256

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 29 / 2013

Transaction ID : SA11C.92660

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

4000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE

A.

Mailing Address 1125 EXECUTIVE CIRCLE

City

IRVING

State

TX

Zip Code

75038

FEC ID number of contributing  
federal political committee.

C C00140061

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2013

Transaction ID : SA11C.93523

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

NATIONAL RESTAURANT ASSOCIATION PAC

B.

Mailing Address 2055 L STREET NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C C00003764

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		27		2013

Transaction ID : SA11C.92745

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

NATIONAL STONE, SAND &amp; GRAVEL ASSOCIATION ROCKPAC

C.

Mailing Address 1605 KING STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C C00089458

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		20		2013

Transaction ID : SA11C.92730

Amount of Each Receipt this Period

3000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6500.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND**

**A.**

Mailing Address ONE CONSTITUTION AVE NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

**C** C00009282

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 25 / 2013

**Transaction ID : SA11C.92601**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**ORACLE PAC**

**B.**

Mailing Address 1015 15TH ST NW  
SUITE 200

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00323048

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2850.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 24 / 2013

**Transaction ID : SA11C.93611**

Amount of Each Receipt this Period

210.00

IN-KIND: FUNDRAISING VENUE

Full Name (Last, First, Middle Initial)

**PFIZER INC. PAC**

**C.**

Mailing Address 235 EAST 42ND STREET

City

NEW YORK

State

NY

Zip Code

10017

FEC ID number of contributing  
federal political committee.

**C** C00016683

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 23 / 2013

**Transaction ID : SA11C.92725**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3710.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PG&E CORPORATION EMPLOYEES ENERGYPAC**
**A.**

Mailing Address 77 BEALE STREET, MAIL CODE: B29H

City

SAN FRANCISCO

State

CA

Zip Code

94105

 FEC ID number of contributing  
 federal political committee.

**C** C00177469

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2013

**Transaction ID : SA11C.92642**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**POLYONE CORP. POLITICAL ACTION COMMITTEE**
**B.**

Mailing Address 33587 WALKER ROAD

City

AVON LAKE

State

OH

Zip Code

44012

 FEC ID number of contributing  
 federal political committee.

**C** C00288712

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2013

**Transaction ID : SA11C.92702**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**REPUBLICAN MAINSTREET PARTNERSHIP PAC**
**C.**

 Mailing Address C/O G&W 2201 WISCONSIN AVE., NW  
 SUITE 320

City

WASHINGTON

State

DC

Zip Code

20007

 FEC ID number of contributing  
 federal political committee.

**C** C00165159

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2013

**Transaction ID : SA11C.92653**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

3000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SANOPI PASTEUR POLITICAL ACTION COMMITTEE**

Mailing Address DISCOVERY DRIVE

City

SWIFTWATER

State

PA

Zip Code

18370

FEC ID number of contributing  
federal political committee.

**C** C00215236

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 06 / 2013

Transaction ID : SA11C.92671

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**SIEMENS CORPORATION PAC**

Mailing Address 300 NEW JERSEY AVENUE, NW  
SUITE 1000

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00353797

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 13 / 2013

Transaction ID : SA11C.92637

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**SPRINT NEXTEL CORPORATION NEXTEL POLITICAL ACTION COMMITTEE**

Mailing Address 401 9TH ST #400

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C** C00392852

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 13 / 2013

Transaction ID : SA11C.92639

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

3000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THE BABCOCK & WILCOX COMPANY POLITICAL ACTION COMMITTEE (B&W PAC)**

**A.**

Mailing Address 2016 MT. ATHOS ROAD

City

LYNCHBURG

State

VA

Zip Code

24504

FEC ID number of contributing  
federal political committee.

**C**

C00365502

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
12 13 2013

**Transaction ID : SA11C.92711**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 1200 WILSON BLVD

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.

**C**

C00142711

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
11 06 2013

**Transaction ID : SA11C.92614**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**THE COMMITTEE FOR THE PRESERVATION OF CAPITALISM PAC**

**C.**

Mailing Address PO BX 65314

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C**

C00328468

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
11 29 2013

**Transaction ID : SA11C.92656**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THE PROCTOR & GAMBLE COMPANY GOOD GOVERNMENT COMMITTEE**

**A.**

Mailing Address **ONE PROCTOR & GAMBLE PLAZA**

City

**CINCINNATI**

State

**OH**

Zip Code

**45202**

FEC ID number of contributing  
federal political committee.

**C** **C00257329**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**3500.00**

Date of Receipt

**11** / **13** / **2013**

**Transaction ID : SA11C.92640**

Amount of Each Receipt this Period

**1000.00**

Full Name (Last, First, Middle Initial)

**THE TIMKEN COMPANY GOOD GOVERNMENT FUND**

**B.**

Mailing Address **1835 DUEBER AVENUE S.W.**

City

**CANTON**

State

**OH**

Zip Code

**44706**

FEC ID number of contributing  
federal political committee.

**C** **C00311308**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**2000.00**

Date of Receipt

**11** / **06** / **2013**

**Transaction ID : SA11C.92613**

Amount of Each Receipt this Period

**1000.00**

Full Name (Last, First, Middle Initial)

**THE WILLIAMS COMPANIES, INC. POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address **1627 EYE STREET NW SUITE 900**

City

**WASHINGTON**

State

**DC**

Zip Code

**20006**

FEC ID number of contributing  
federal political committee.

**C** **C00040394**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**2000.00**

Date of Receipt

**12** / **20** / **2013**

**Transaction ID : SA11C.92731**

Amount of Each Receipt this Period

**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THERMO FISHER SCIENTIFIC INC. PAC**

Mailing Address 81 WYMAN STREET

PO BOX 9046

City

WALTHAM

State

MA

Zip Code

02454

FEC ID number of contributing  
federal political committee.

**C** C00292318

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 13 / 2013

Transaction ID : SA11C.92707

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**TIBERI FOR CONGRESS**

Mailing Address 2931 E DUBLIN GRANVILLE ROAD

SUITE 190

City

COLUMBUS

State

OH

Zip Code

43231

FEC ID number of contributing  
federal political committee.

**C** C00347492

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 13 / 2013

Transaction ID : SA11C.92710

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**TIM GRIFFIN FOR CONGRESS COMMITTEE**

Mailing Address 11300 CANTRELL RD

SUITE 301

City

LITTLE ROCK

State

AR

Zip Code

72212

FEC ID number of contributing  
federal political committee.

**C** C00468116

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 06 / 2013

Transaction ID : SA11C.92673

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

4000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**JOHNSON FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TRUST PAC TEAM REPUBLICANS FOR UTILIZING SENSIBLE TACTICS**

Mailing Address 228 S. WASHINGTON STREET  
 SUITE 115

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing  
federal political committee.

**C** C00330720

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2013

**Transaction ID : SA11C.92733**

Amount of Each Receipt this Period

3000.00

**B.** Full Name (Last, First, Middle Initial)  
**UNITED AIRLINES POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 66100 - FIN.REPORTING WHQAJ  
 ATTN: FINANCIAL REPORTING-WHQAJ

City	State	Zip Code
CHICAGO	IL	60666

FEC ID number of contributing  
federal political committee.

**C** C00078261

Name of Employer  
 002

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2013

**Transaction ID : SA11C.92597**

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**UNITED MINE WORKERS OF AMERICA - COAL MINERS POLITICAL ACTION COMMITTEE**

Mailing Address 18354 QUANTICO GATEWAY DR  
 SUITE 200

City	State	Zip Code
TRIANGLE	VA	22172

FEC ID number of contributing  
federal political committee.

**C** C00013342

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2013

**Transaction ID : SA11C.92598**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**JOHNSON FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**UNITED PARCEL SERVICE INC. PAC**

Mailing Address 55 GLENLAKE PARKWAY NE

City	State	Zip Code
ATLANTA	GA	30328

FEC ID number of contributing federal political committee.

**C** C00064766

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 21 / 2013

Transaction ID : SA11C.92719

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
**USEC INC. POLITICAL ACTION COMMITTEE (USEC PAC)**

Mailing Address 6903 ROCKLEDGE DRIVE

City	State	Zip Code
BETHESDA	MD	20817

FEC ID number of contributing federal political committee.

**C** C00355719

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 10 / 2013

Transaction ID : SA11C.92668

Amount of Each Receipt this Period

1500.00

**C.** Full Name (Last, First, Middle Initial)  
VERIZON COMMUNICATIONS INC./VERIZON WIRELESS GOOD GOVERNMENT CLUB (VERIZON/VERIZON WIRELES

Mailing Address 1300 I ST NW, STE 400 WEST  
ATTN: TAYLOR CRAIG

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee.

**C** C00186288

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 06 / 2013

Transaction ID : SA11C.92675

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT**

Mailing Address 702 S.W. 8TH STREET

City

BENTONVILLE

State

AR

Zip Code

72716

FEC ID number of contributing  
federal political committee.

**C** C00093054

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 13 / 2013

**Transaction ID : SA11C.92701**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**WENSTRUP FOR CONGRESS**

Mailing Address PO BOX 9551

City

CINCINNATI

State

OH

Zip Code

45209

FEC ID number of contributing  
federal political committee.

**C** C00497818

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 21 / 2013

**Transaction ID : SA11C.92720**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**WINDOW AND DOOR MANUFACTURERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 2025 M STREET, NW  
SUITE 800

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00492041

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 06 / 2013

**Transaction ID : SA11C.92669**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

3000.00

**TOTAL** This Period (last page this line number only).....

107460.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

PATRIOT DAY II 2013

Mailing Address 228 S WASHINGTON STREET

SUITE 115

City

ALEXASNDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C C00547836

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

24999.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		27		2013

Transaction ID : SA12.92746

Amount of Each Receipt this Period

2558.65

TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)

JHONG U KIM

Mailing Address 501 MORNINGSTAR RD.

City

STATEN ISLAND

State

NY

Zip Code

10303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

GOLDEN HAND OF STATEN ISLAND

BUSINESSMAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		27		2013

Transaction ID : SA12.93533

Amount of Each Receipt this Period

138.89

[MEMO ITEM]  
TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)

MICHAEL J HOOK

Mailing Address 1541 BUCCANEER CT.

City

MARCO ISLAND

State

FL

Zip Code

34145

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

ROLAND-KELLY

MANAGING DIRECTOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

555.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2013

Transaction ID : SA12.93534

Amount of Each Receipt this Period

555.56

[MEMO ITEM]  
TRANSFER IN AFFILIATED

SUBTOTAL of Receipts This Page (optional).....

2558.65

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 59 OF 95

(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICA FIRST POLITICAL ACTION COMMITTEE

Mailing Address 611 PENNSYLVANIA AVE SE #308

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C C00427187

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1111.11

Date of Receipt

M M / D D / Y Y Y Y
10 / 07 / 2013

Transaction ID : SA12.93535

Amount of Each Receipt this Period

1111.11

[MEMO ITEM]

TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)

B. STANLEY A STAR

Mailing Address 1435 GALLEON DR

City

NAPLES

State

FL

Zip Code

34102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

222.23

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2013

Transaction ID : SA12.93536

Amount of Each Receipt this Period

222.23

[MEMO ITEM]

TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)

C. PAUL J HARDER

Mailing Address S6230 OLD LAKE SHORE RD.

City

LAKEVIEW

State

NY

Zip Code

14085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSS HEALTH

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

277.77

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2013

Transaction ID : SA12.93537

Amount of Each Receipt this Period

277.77

[MEMO ITEM]

TRANSFER IN AFFILIATED

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 60 OF 95

(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

STEPHEN H FLETCHER

A.

Mailing Address 401 N NINTH ST.

City

ALPENA

State

MI

Zip Code

49707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ALPENA POWER RESOURCES

Occupation

CEO

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

277.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2013

Transaction ID : SA12.93538

Amount of Each Receipt this Period

277.78

[MEMO ITEM]

TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)

FUND FOR AMERICAN EXCEPTIONALISM: THE

B.

Mailing Address 1801 N SHUTT HILL ROAD

City

HUNTINGTON

State

IN

Zip Code

46750

FEC ID number of contributing  
federal political committee.

C

C00512855

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

111.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2013

Transaction ID : SA12.93539

Amount of Each Receipt this Period

111.11

[MEMO ITEM]

TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)

PAUL J HARDER

C.

Mailing Address S6230 OLD LAKE SHORE RD.

City

LAKEVIEW

State

NY

Zip Code

14085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSS HEALTH

Occupation

EXECUTIVE

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

333.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		12		2013

Transaction ID : SA12.93540

Amount of Each Receipt this Period

55.56

[MEMO ITEM]

TRANSFER IN AFFILIATED

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER:  
(check only one)

	11a		11b		11c		11d		
X	12		13a		13b		14		15

NAME OF COMMITTEE (In Full)  
**JOHNSON FOR CONGRESS**

2558.65

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
.

Form/Schedule: SA12

Transaction ID : SA12.93541

THIS REPRESENTS THE TRANSFER BACK TO PATRIOT DAY II 2013 OF \$355.56 OF THE \$555.56  
CONTRIBUTION MADE ON 9/30/2013

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AQUA AL 2**

Mailing Address 212 7TH STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
FUNDRAISER MEALS

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2013

Amount of Each Disbursement this Period

1240.01
---------

Transaction ID : SB17.93498

**B. BOB EVANS**

Mailing Address 3776 SOUTH HIGH ST

City	State	Zip Code
COLUMBUS	OH	43207

Purpose of Disbursement  
CAMPAIGN MEALS

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

Amount of Each Disbursement this Period

31.67
-------

Transaction ID : SB17.93578

**C. BRYANT PARK EVENTS**Mailing Address 1065 AVENUE OF THE AMERICAS  
SUITE 2400

City	State	Zip Code
NEW YORK	NY	10018

Purpose of Disbursement  
FUNDRAISING EVENT VENUE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2013

Amount of Each Disbursement this Period

567.05
--------

Transaction ID : SB17.93496

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1838.73

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BRYANT PARK EVENTS**Mailing Address 1065 AVENUE OF THE AMERICAS  
SUITE 2400

City NEW YORK State NY Zip Code 10018

Purpose of Disbursement  
FUNDRAISING VENUE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		13		2013

Amount of Each Disbursement this Period

567.05
--------

Transaction ID : SB17.93583

**B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CAMPAIGN MEALS

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2013

Amount of Each Disbursement this Period

74.64
-------

Transaction ID : SB17.93499

**C. CARMINE'S WASHINGTON DC**

Mailing Address 425 7TH STREET NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement  
CAMPAIGN CHRISTMAS PARTY

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		29		2013

Amount of Each Disbursement this Period

2025.00
---------

Transaction ID : SB17.93509

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2666.69



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CARMINE'S WASHINGTON DC**

Mailing Address 425 7TH STREET NW

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
CHRISTMAS PARTY VENUE & MEALS

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2013

Amount of Each Disbursement this Period

2058.80
---------

Transaction ID : SB17.93573

**B. COLUMBIANA COUNTY REPUBLICAN PARTY**

Mailing Address 124 WEST LINCOLN WAY

City	State	Zip Code
LISBON	OH	44432

Purpose of Disbursement  
REAGAN DAY DINNER TICKETS

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2013

Amount of Each Disbursement this Period

300.00
--------

Transaction ID : SB17.92760

**C. COLUMBIANA COUNTY REPUBLICAN PARTY**

Mailing Address 124 WEST LINCOLN WAY

City	State	Zip Code
LISBON	OH	44432

Purpose of Disbursement  
ANNUAL CHRISTMAS DINNER

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		27		2013

Amount of Each Disbursement this Period

29.00
-------

Transaction ID : SB17.93601

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2387.80

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 66 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ELECTEKUSA**

Mailing Address P.O. BOX 23715

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement  
CAMPAIGN SOFTWARE

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2013

Amount of Each Disbursement this Period

800.00
--------

Transaction ID : SB17.92767

**B. ELECTEKUSA**

Mailing Address P.O. BOX 23715

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement  
CAMPAIGN SOFTWARE

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2013

Amount of Each Disbursement this Period

800.00
--------

Transaction ID : SB17.93521

**C. ENTERPRISE RENT-A-CAR CO. OF KENTUCKY**

Mailing Address 832 PIKE ST

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
CAMPAIGN TRAVEL

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2013

Amount of Each Disbursement this Period

223.06
--------

Transaction ID : SB17.93560

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1823.06

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ENTERPRISE RENT-A-CAR CO. OF KENTUCKY**

Mailing Address 832 PIKE ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		10		2013

City	State	Zip Code
MARIETTA	OH	45750

Amount of Each Disbursement this Period

245.92
--------

Purpose of Disbursement  
CAMPAIGN TRAVEL

001

Transaction ID : SB17.93565

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. EPIPHANY PRODUCTIONS, INC.**

Mailing Address 104 HUME AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2013

City	State	Zip Code
ALEXANDRIA	VA	22301

Amount of Each Disbursement this Period

10000.00
----------

Purpose of Disbursement  
CAMPAIGN FUNDRAISER RETAINER

001

Transaction ID : SB17.92763

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. EPIPHANY PRODUCTIONS, INC.**

Mailing Address 104 HUME AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2013

City	State	Zip Code
ALEXANDRIA	VA	22301

Amount of Each Disbursement this Period

5250.86
---------

Purpose of Disbursement  
FUNDRAISER CONSULTANT COSTS

001

Transaction ID : SB17.93519

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

15496.78

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. EPIPHANY PRODUCTIONS, INC.**

Mailing Address 104 HUME AVENUE

City	State	Zip Code
ALEXANDRIA	VA	22301

Purpose of Disbursement  
FUNDRAISING CONSULTANT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		27		2013

Amount of Each Disbursement this Period

5014.55
---------

Transaction ID : SB17.93602

**B. AMANDA FINN**

Mailing Address 428 6TH STREET

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
CAMPAIGN MILEAGE AND EXPENSE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2013

Amount of Each Disbursement this Period

433.46
--------

Transaction ID : SB17.92754

**C. SPEEDWAY 009185**

Mailing Address 400 MUSKINGUM DR

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
MEALS

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2013

Amount of Each Disbursement this Period

6.87
------

Transaction ID : SB17.92756

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5448.01

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMANDA FINN**

Mailing Address 428 6TH STREET

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
CAMPAIGN MILEAGE AND EXPENSE REIMBURSEMENT

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2013

Amount of Each Disbursement this Period

448.64
--------

Transaction ID : SB17.93511

**B. AMANDA FINN**

Mailing Address 428 6TH STREET

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
CAMPAIGN MILEAGE REIMBURSEMENT

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2013

Amount of Each Disbursement this Period

441.46
--------

Transaction ID : SB17.93594

**C. GIANT EAGLE #6510**

Mailing Address 128 GROSS ST

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
REAGAN DAY DINNER BASKET

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2013

Amount of Each Disbursement this Period

17.08
-------

Transaction ID : SB17.92771

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

907.18

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 70 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TODD HAWKINS**

Mailing Address 350 JENNINGS HILL RD.

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
IN-KIND: FOOD FOR FUNDRAISING EVENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2013

Amount of Each Disbursement this Period

680.00
--------

Transaction ID : SB17.93614

**B. FRANK HOAGLAND**

Mailing Address 797 COOL SPRINGS RD

City	State	Zip Code
MINGO JUNCTION	OH	43938

Purpose of Disbursement  
CAMPAIGN MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2013

Amount of Each Disbursement this Period

107.35
--------

Transaction ID : SB17.93510

**C. HOLIDAY INN - KEY BRIDGE**

Mailing Address 1900 NORTH FORT MYER DRIVE

City	State	Zip Code
ARLINGTON	VA	22209

Purpose of Disbursement  
CAMPAIGN TRAVEL - LODGING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2013

Amount of Each Disbursement this Period

90.39
-------

Transaction ID : SB17.93559

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

877.74

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. HOLIDAY INN - KEY BRIDGE**

Mailing Address 1900 NORTH FORT MYER DRIVE

City	State	Zip Code
ARLINGTON	VA	22209

Purpose of Disbursement  
CAMPAIGN TRAVEL - LODGING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

Amount of Each Disbursement this Period

185.79
--------

Transaction ID : SB17.93581

**B. HYDE BROTHERS PRINTING CO.**

Mailing Address 101 RATHBONE ROAD, PO BOX 586

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
CAMPAIGN CARD PRINTING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2013

Amount of Each Disbursement this Period

26.33
-------

Transaction ID : SB17.93493

**C. BILL JOHNSON**

Mailing Address 519 FIFTH STREET

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
CAMPAIGN MILEAGE REIMBURSEMENT

002

Category/  
Type

Candidate Name

**BILL JOHNSON**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: OH

District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		11		2013

Amount of Each Disbursement this Period

691.91
--------

Transaction ID : SB17.92764

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

904.03

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BILL JOHNSON**

Mailing Address 519 FIFTH STREET

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
CAMPAIGN MILEAGE & EXPENSE REIMBURSEMENT

001

Candidate Name

**BILL JOHNSON**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: OH

District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2013

Amount of Each Disbursement this Period

103.00
--------

Transaction ID : SB17.93596

**B. JPMORGAN CHASE BANK, N.A.**

Mailing Address PO BOX 260180

City	State	Zip Code
BATON ROUGE	LA	70826

Purpose of Disbursement  
BANK SERVICE FEE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2013

Amount of Each Disbursement this Period

4.00
------

Transaction ID : SB17.93550

**C. JPMORGAN CHASE BANK, N.A.**

Mailing Address PO BOX 260180

City	State	Zip Code
BATON ROUGE	LA	70826

Purpose of Disbursement  
CHECK SUPPLY

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2013

Amount of Each Disbursement this Period

73.00
-------

Transaction ID : SB17.93551

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

180.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. W. ROGER LEWIS**

Mailing Address 55500 DILLES BOTTOM ROAD

City	State	Zip Code
SHADYSIDE	OH	43947

Purpose of Disbursement  
IN-KIND: FOOD FOR FUNDRAISER

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2013

Amount of Each Disbursement this Period

413.15
--------

Transaction ID : SB17.93616

**B. MARIETTA COLLEGE REPUBLICANS**

Mailing Address BOX 1579 MARIETTA COLLEGE

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
DONATION FOR CPAC TRIP

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		19		2013

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB17.92765

**C. OHIO HOUSE REPUBLICAN ORGANIZING COMMITTEE**

Mailing Address 4679 WINTERSET DRIVE

City	State	Zip Code
COLUMBUS	OH	43220

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2013

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : SB17.93590

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1163.15

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. OHIO REPUBLICAN SENATE ORGANIZING CMTE**

Mailing Address 4679 WINTERSET DR

City	State	Zip Code
COLUMBUS	OH	43220

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2013

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : SB17.93591

**B. ORACLE PAC**Mailing Address 1015 15TH ST NW  
SUITE 200

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement  
IN-KIND: FUNDRAISING VENUE

Candidate Name

**ORACLE PAC**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2013

Amount of Each Disbursement this Period

210.00
--------

Transaction ID : SB17.93612

**C. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
CAMPAIGN PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2013

Amount of Each Disbursement this Period

2114.52
---------

Transaction ID : SB17.92782

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2574.52

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 75 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
CAMPAIGN PAYROLL TAXES

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2013

Amount of Each Disbursement this Period

828.51
--------

Transaction ID : SB17.92783

**B. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
CAMPAIGN PAYROLL SERVICES

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2013

Amount of Each Disbursement this Period

42.27
-------

Transaction ID : SB17.92784

**C. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
CAMPAIGN PAYROLL

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2013

Amount of Each Disbursement this Period

2114.52
---------

Transaction ID : SB17.92785

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2985.30

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
CAMPAIGN PAYROLL TAXES

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2013

Amount of Each Disbursement this Period

828.51
--------

Transaction ID : SB17.92786

**B. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
CAMPAIGN PAYROLL SERVICES

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2013

Amount of Each Disbursement this Period

33.17
-------

Transaction ID : SB17.92787

**C. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
PAYROLL EXPENSE

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2013

Amount of Each Disbursement this Period

2114.50
---------

Transaction ID : SB17.93486

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2976.18

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
PAYROLL TAXES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2013

Amount of Each Disbursement this Period

828.53
--------

Transaction ID : SB17.93487

**B. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
PAYROLL COSTS

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2013

Amount of Each Disbursement this Period

33.17
-------

Transaction ID : SB17.93488

**C. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
PAYROLL PROCESSING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2013

Amount of Each Disbursement this Period

33.17
-------

Transaction ID : SB17.93492

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

894.87

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		27		2013

City	State	Zip Code
HUDSON	OH	44236

Amount of Each Disbursement this Period

2114.52
---------

Purpose of Disbursement  
PAYROLL EXPENSE

001

Transaction ID : SB17.93490

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		29		2013

City	State	Zip Code
HUDSON	OH	44236

Amount of Each Disbursement this Period

825.51
--------

Purpose of Disbursement  
PAYROLL TAXES

001

Transaction ID : SB17.93491

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2013

City	State	Zip Code
HUDSON	OH	44236

Amount of Each Disbursement this Period

2114.51
---------

Purpose of Disbursement  
STAFF PAYROLL

001

Transaction ID : SB17.93545

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5054.54

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
PAYROLL TAXES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		13		2013

Amount of Each Disbursement this Period

823.52
--------

Transaction ID : SB17.93546

**B. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
PAYROLL EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2013

Amount of Each Disbursement this Period

33.17
-------

Transaction ID : SB17.93547

**C. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
STAFF PAYROLL

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2013

Amount of Each Disbursement this Period

2114.51
---------

Transaction ID : SB17.93548

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2971.20

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 80 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
PAYROLL EXPENSE

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 31 / 2013

Amount of Each Disbursement this Period

33.17
-------

Transaction ID : SB17.93549

**B. PAYCHEX**

Mailing Address 101 E HINES HILL ROAD

City	State	Zip Code
HUDSON	OH	44236

Purpose of Disbursement  
PAYROLL TAXES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 31 / 2013

Amount of Each Disbursement this Period

819.02
--------

Transaction ID : SB17.93605

**C. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING FEE

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 03 / 2013

Amount of Each Disbursement this Period

31.50
-------

Transaction ID : SB17.92550

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

883.69



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2013

Amount of Each Disbursement this Period

19.20
-------

Transaction ID : SB17.92549

**B. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		11		2013

Amount of Each Disbursement this Period

0.60
------

Transaction ID : SB17.92553

**C. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2013

Amount of Each Disbursement this Period

312.00
--------

Transaction ID : SB17.92554

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

331.80

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING FEE

003

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2013

Amount of Each Disbursement this Period

9.00
------

Transaction ID : SB17.92552

**B. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING FEE

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2013

Amount of Each Disbursement this Period

4.50
------

Transaction ID : SB17.92551

**C. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING FEE

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		22		2013

Amount of Each Disbursement this Period

1.50
------

Transaction ID : SB17.92610

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

15.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2013

Amount of Each Disbursement this Period

0.60
------

Transaction ID : SB17.92609

**B. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING EXPENSE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		08		2013

Amount of Each Disbursement this Period

60.00
-------

Transaction ID : SB17.93482

**C. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		19		2013

Amount of Each Disbursement this Period

30.00
-------

Transaction ID : SB17.93484

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

90.60

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING EXPENSE

003

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2013

Amount of Each Disbursement this Period

60.00
-------

Transaction ID : SB17.93483

**B. PIRYX**

Full Name (Last, First, Middle Initial)

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE DONATION FEE

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2013

Amount of Each Disbursement this Period

216.00
--------

Transaction ID : SB17.93543

**C. PIRYX**

Full Name (Last, First, Middle Initial)

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ON LINE CONTRIBUTION FEE

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		05		2013

Amount of Each Disbursement this Period

31.50
-------

Transaction ID : SB17.93542

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

307.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE DONATION FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		10		2013

Amount of Each Disbursement this Period

156.00
--------

Transaction ID : SB17.93544

**B. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2013

Amount of Each Disbursement this Period

30.00
-------

Transaction ID : SB17.93610

**C. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2013

Amount of Each Disbursement this Period

60.00
-------

Transaction ID : SB17.93607

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

246.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		20		2013

Amount of Each Disbursement this Period

1.50
------

Transaction ID : SB17.93608

**B. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		26		2013

Amount of Each Disbursement this Period

156.00
--------

Transaction ID : SB17.93606

**C. PIRYX**

Mailing Address 144 2ND STREET, 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
ONLINE FUNDRAISING FEE

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		27		2013

Amount of Each Disbursement this Period

30.00
-------

Transaction ID : SB17.93609

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

187.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PROMOS UNLIMITED**

Mailing Address 408 EAST STATE STREET

City	State	Zip Code
SALEM	OH	44460

Purpose of Disbursement  
T-SHIRTS FOR CAMPAIGN EVENTS

007

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2013

Amount of Each Disbursement this Period

480.00
--------

Transaction ID : SB17.92762

**B. ALEX SCHARFETTER**

Mailing Address 182 S. PAINT ST.

City	State	Zip Code
CHILLICOTHE	OH	45601

Purpose of Disbursement  
TRAVEL MILEAGE & EXPENSE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2013

Amount of Each Disbursement this Period

696.96
--------

Transaction ID : SB17.92757

**C. WALMART**

Mailing Address 702 SW 8TH STREET

City	State	Zip Code
BENTONVILLE	AR	72716

Purpose of Disbursement  
PARADE CANDY

007

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2013

Amount of Each Disbursement this Period

10.45
-------

Transaction ID : SB17.92758

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1176.96

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ALEX SCHARFETTER**

Mailing Address 182 S. PAINT ST.

City	State	Zip Code
CHILLICOTHE	OH	45601

Purpose of Disbursement  
CAMPAIGN MILEAGE & EXPENSE REIMBURSEMENT

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2013

Amount of Each Disbursement this Period

1068.80
---------

Transaction ID : SB17.93515

**B. OHIO CHRISTIAN ALLIANCE**

Mailing Address P.O. BOX 3076

City	State	Zip Code
AKRON	OH	44309

Purpose of Disbursement  
ANNUAL DINNER TICKET

002

Candidate Name

**OHIO CHRISTIAN ALLIANCE**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		12		2013

Amount of Each Disbursement this Period

60.00
-------

Transaction ID : SB17.93516

[MEMO ITEM]

**C. ALEX SCHARFETTER**

Mailing Address 182 S. PAINT ST.

City	State	Zip Code
CHILLICOTHE	OH	45601

Purpose of Disbursement  
CAMPAIGN MILEAGE & EXPENSE REIMBURSEMENT

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2013

Amount of Each Disbursement this Period

669.93
--------

Transaction ID : SB17.93593

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1738.73



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SECOND FREEDOM, LLC**

Mailing Address PO BOX 5306

City	State	Zip Code
POLAND	OH	44514

Purpose of Disbursement  
ACCOUNTNG/COMPLIANCE FEES

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2013

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB17.92761

**B. SECOND FREEDOM, LLC**

Mailing Address PO BOX 5306

City	State	Zip Code
POLAND	OH	44514

Purpose of Disbursement  
ACCOUNTING/COMPLIANCE COSTS

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2013

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB17.93520

**C. SECOND FREEDOM, LLC**

Mailing Address PO BOX 5306

City	State	Zip Code
POLAND	OH	44514

Purpose of Disbursement  
ACCOUNTING/COMPLIANCE SERVICES

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		07		2013

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB17.93589

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SONOMA RESTAURANT**

Mailing Address 233 PENNSYLVANIA AVE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
FUNDRAISER MEALS

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2013

Amount of Each Disbursement this Period

180.70
--------

Transaction ID : SB17.93500

**B. SONOMA RESTAURANT**

Mailing Address 233 PENNSYLVANIA AVE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
FUNDRAISER MEAL

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		10		2013

Amount of Each Disbursement this Period

291.20
--------

Transaction ID : SB17.93568

**C. SPEEDWAY 009185**

Mailing Address 400 MUSKINGUM DR

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
FUEL - CAMPAIGN TRAVEL

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		22		2013

Amount of Each Disbursement this Period

67.84
-------

Transaction ID : SB17.93501

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

539.74

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SPEEDWAY 009185**

Mailing Address 400 MUSKINGUM DR

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
CAMPAIGN TRAVEL FUEL

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2013

Amount of Each Disbursement this Period

21.01
-------

Transaction ID : SB17.93552

**B. THE NEW YORK PALACE**

Mailing Address 455 MADISON AVENUE

City	State	Zip Code
NEW YORK	NY	10022

Purpose of Disbursement  
CAMPAIGN TRAVEL - LODGING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2013

Amount of Each Disbursement this Period

149.81
--------

Transaction ID : SB17.93586

**C. UNITED STATES POSTAL SERVICE - MARIETTA**

Mailing Address 100 POST ST

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
CAMPAIGN PO BOX RENEWAL

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2013

Amount of Each Disbursement this Period

93.60
-------

Transaction ID : SB17.92770

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

264.42

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UNITED STATES POSTAL SERVICE - MARIETTA**

Mailing Address 100 POST ST

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
POSTAGE STAMPS

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2013

Amount of Each Disbursement this Period

9.20
------

Transaction ID : SB17.93494

**B. UNITED STATES POSTAL SERVICE - MARIETTA**

Mailing Address 100 POST ST

City	State	Zip Code
MARIETTA	OH	45750

Purpose of Disbursement  
CAMPAIGN POSTAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2013

Amount of Each Disbursement this Period

46.00
-------

Transaction ID : SB17.93506

**C. US AIRWAYS**

Mailing Address 4000 E SKY HARBOR BLVD

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement  
CAMPAIGN TRAVEL

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2013

Amount of Each Disbursement this Period

358.20
--------

Transaction ID : SB17.92773

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

413.40

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WALMART**

Mailing Address 702 SW 8TH STREET

City	State	Zip Code
BENTONVILLE	AR	72716

Purpose of Disbursement  
OFFICE SUPPLIES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		29		2013

Amount of Each Disbursement this Period

6.19
------

Transaction ID : SB17.93588

**B.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6.19
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58851.31
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JOHNSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. JAMES W DENNY III**

Mailing Address 9723 BRIAR FOREST DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2013

City	State	Zip Code
HOUSTON	TX	77042

Amount of Each Disbursement this Period

Purpose of Disbursement  
CONTRIBUTION REFUND

010

185.12

Transaction ID : SB20A.93621

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

185.12

185.12

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SB20A  
Transaction ID : SB20A.93621

REFUND OF EXCESSIVE PORTION OF IN-KIND CONTRIBUTION MADE ON 9/16/2013

Form/Schedule:  
Transaction ID: